

**SC - BREAST & CERVICAL CANCER EARLY DETECTION PROGRAM  
 BEST CHANCE NETWORK  
 INCOME ELIGIBILITY GUIDELINES  
 FOR THE PERIOD OF 06/30/23 –06/29/24**

<b>FAMILY SIZE</b>	<b>SCALE <math>\leq</math>250% PATIENT PAYS 0% Annual Income</b>
1	\$36,450 or less
2	\$49,300 or less
3	\$62,150 or less
4	\$75,000 or less
5	\$87,850 or less
6	\$100,700 or less
7	\$113,550 or less
8	\$126,400 or less
<p><b>NOTE: For families/households with more than 8 persons, add \$12,850 for each additional person.</b></p>	

**The family size and income should be reviewed with the patient annually and documented on the BCN enrollment form.**

Source: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, HHS Poverty Guidelines for 2023, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>